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|---------------|-------------|-------|----------------|---------------------|
| SERIAL NUMBER | FILING DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
| 09/018,664 | 02/04/98 | 604 | 3734 | 526/20 |

APPLICANT UZI ESHEL, HERZELIA, ISRAEL; JACOB LAZAROVITZ, HOD HASHARON, ISRAEL.

CONTINUING DOMESTIC DATA***
VERIFIED

 M

371 (NAT'L STAGE) DATA***
VERIFIED

 M

FOREIGN APPLICATIONS***
VERIFIED

 M

***** SMALL ENTITY *****

| | | | | | |
|---|--|---------------------|-------------------|-----------------|-----------------------|
| Foreign Priority claimed 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWING | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| Verified and Acknowledged | Examiner's Initials <u> M </u> Initials <u> M </u> | ILX | 2 | 11 | 2 |

ADDRESS
ANTHONY CASTORINA
MARK FRIEDMAN LTD.
2001 JEFFERSON DAVIS HIGHWAY
SUITE 207
ARLINGTON VA 22202

TITLE
INTERNAL CATHETER

| | | |
|------------------------|---|---|
| FILING FEE RECEIVED | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit |
| \$395 | | |